

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PR	67847	3/30/00
O.I.P.E. CLASSIFIER	ESL		1/13/00
FORMALITY REVIEW	RR	700291	6/2/00
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
- (Through numeral) ...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Date
Final	
Original	
1	✓ 10/14/03
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	-
12	-
13	✓
14	-
15	✓
16	✓
17	✓
18	-
19	-
20	✓
21	-
22	-
23	-
24	✓
25	-
26	✓
27	✓
28	✓
29	✓
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31	✓
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33	✓
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36	✓
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38	✓
39	-
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	-

Claim		Date
Final	Original	
51		10/10/03
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Claim		Date
Final	Original	
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**BEST AVAILABLE COPY**

If more than 150 claims or 10 actions  
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